



CITY OF FRUITLAND PARK  
BUILDING DEPARTMENT

REROOF CHECKLIST

1. A COMPLETED APPLICATION
2. A NOTICE OF COMMENCEMENT FOR JOBS OVER \$2,500 IN VALUE
3. AN OWNER BUILDER AFFIDAVIT IF PERMIT IS APPLIED FOR BY THE OWNER
4. A ROOF PLAN SHOWING THE PITCH OF THE ROOF, UNDERLAYMENT PROPOSED AS WELL AS THE PRODUCT APPROVAL NUMBER OF THE ROOF COVERING
5. METAL ROOFS MUST PROVIDE INSTALLATION DETAILS
6. PROOF OF PROPERTY OWNERSHIP

FLAT OR NO PITCH ROOFS MUST INDICATE THAT POSITIVE DRAINAGE WILL BE ACHIEVED AND HOW THIS WILL BE ACHIEVED.

THE REQUIRED INSPECTIONS ARE A ROOF NAILING, DRY-IN AND FLASHING AND A FINAL.

PLEASE REQUEST INSPECTIONS BY SENDING AN EMAIL TO [PERMITS@FRUITLANDPARK.ORG](mailto:PERMITS@FRUITLANDPARK.ORG) .  
INSPECTIONS WILL BE PROCESSED AS QUICKLY AS POSSIBLE, BUT WE ENCOURAGE YOU TO MAKE CONTACT WITH THE INSPECTOR THE DAY BEFORE TO MAKE SURE THE INSPECTION IS SCHEDULED. YOU CAN CONTACT JEFF GERLING (352) 536-4481 OR LARRY SCHMIDT (352) 348-1344.

To Schedule An Inspection Email:  
permits@Fruitlandpark.org



Applicant Email Address

Permit Number

Office Use Only, Do Not Write Here

Project Address

Project Description

# Reroof

Owner's Name

Mailing Address

City, State, Zip

Telephone

Estimated Cost of Project

\$

Hiring a Contractor?

Circle one

Yes No

General Contractor

Mailing Address

City, State, Zip

Telephone

Not Applicable

Construction Contractor

Mailing Address

City, State, Zip

Telephone

Not Applicable

Electrical Contractor

Mailing Address

City, State, Zip

Telephone

Not Applicable

Plumbing Contractor

Mailing Address

City, State, Zip

Telephone

Not Applicable

HVAC Contractor

Mailing Address

City, State, Zip

Telephone

Not Applicable

Roofing Contractor

Mailing Address

City, State, Zip

Telephone

**Signature of Applicant**

Date \_\_\_\_\_

OTHER INFORMATION- only required for new structures and additions


WARNING TO OWNER: Your failure to record a Notice of Commencement may result in your paying twice for improvements to your property. If you intend to obtain financing, consult with your lender or an attorney before recording your Notice of Commencement. The issuance of a building permit does not assure the building setbacks have been met or that the structure does not encroach on an easement. The owner and/or contractor have the sole responsibility of determining compliance with setbacks and non-encroachment of easements. If the City determines the structure does not meet applicable setbacks or improperly encroaches on an easement, the owner is responsible for moving the structure, restoring the easement to its original condition, or otherwise making the structure comply with City setbacks and other land use requirements. Permits expire 6 months after issuance.

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as identification and who did \_\_\_\_\_ or did not \_\_\_\_\_ take an oath.

(Seal)  
Notary Public

After recording return to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Permit No: \_\_\_\_\_  
Tax Folio or Alternate Key #: \_\_\_\_\_  
\_\_\_\_\_

**NOTICE OF COMMENCEMENT**  
**Astatula, Clermont, Eustis, Fruitland Park, Howey in the Hills,**  
**Groveland, Lady Lake, Lake County, Leesburg, Mascotte,**  
**Minneola, Montverde, Mount Dora, Tavares, Umatilla**

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. Description of property: Legal Description: (legal description of the property, and street address if available)  
\_\_\_\_\_  
\_\_\_\_\_  
Street Address: \_\_\_\_\_
2. General description of improvement: \_\_\_\_\_
3. Owner's Information: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Interest in Property: \_\_\_\_\_  
Name and Address of fee simple titleholder (if other than owner): \_\_\_\_\_  
\_\_\_\_\_
4. Contractor Information: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
5. Surety Information: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_  
Amount of Bond: \_\_\_\_\_
6. Lender Information: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
8. In addition to himself or herself, Owner designates \_\_\_\_\_ of \_\_\_\_\_  
to receive a copy of the following Lienor's Notice as Provided in Section 713.13 (1) (b), Florida Statutes:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified) \_\_\_\_\_.

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

\_\_\_\_\_  
Signature of Owner or Owner's Authorized Officer/Director /Partner /Manager

\_\_\_\_\_  
Printed Name & Signatory's Title/Office

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_  
who is personally known to me or has produced \_\_\_\_\_ as identification and who did \_\_\_\_\_ or did not \_\_\_\_\_  
take an oath.

\_\_\_\_\_  
Signature of Notary Public - State of Florida

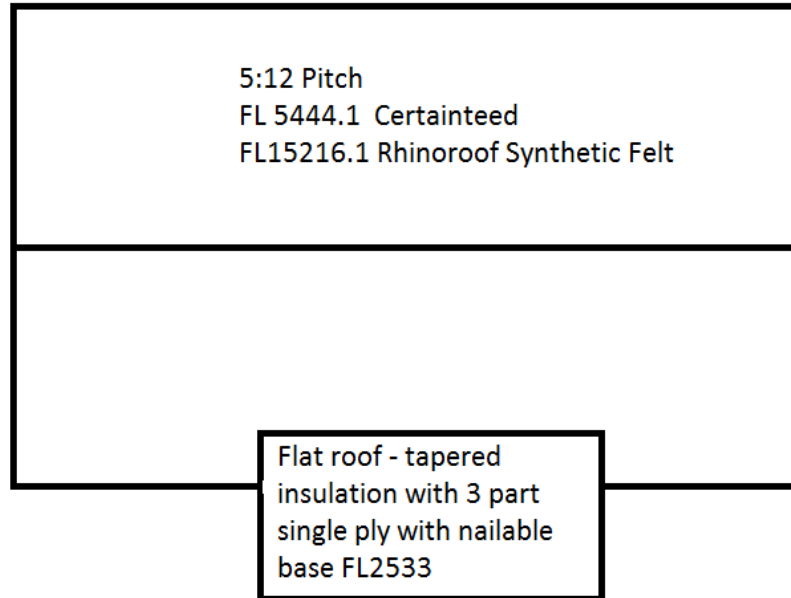
\_\_\_\_\_  
Print, type or Stamp Commissioned Name of Notary Public

**Verification pursuant to Section 92.525, Florida Statutes**

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of Natural Person (Owner) Signing Above

### Sample Roof Plan



# OWNER BUILDER STATEMENT/AFFIDAVIT

Astatula, Clermont, Eustis, Fruitland Park, Howey in the Hills,  
Groveland, Lady Lake, Lake County, Leesburg, Mascotte,  
Minneola, Montverde, Mount Dora, Tavares, Umatilla

AS REQUIRED BY F.S. 489.103(7)

Florida Statutes are quoted in part for your information to indicate the authority for exemptions for homeowners from qualifying as contractors and to express any applicable restrictions and responsibilities.

## OWNERS MUST PERSONALLY APPEAR AT THE BUILDING DEPARTMENT TO SIGN THIS DOCUMENT.

BY SIGNING THIS STATEMENT/AFFIDAVIT, I ATTEST THAT: ( *Initial to the left of each statement* )

\_\_\_\_\_ I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

\_\_\_\_\_ I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

\_\_\_\_\_ I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my name. I also understand that a contractor is required by law to be licensed in Florida, and to list his or her license numbers on all permit applications and contracts.

\_\_\_\_\_ I understand that I may build or improve a one or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or improved for sale or lease. If a building or residence that I have built or improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or improved it for sale or lease, which is a violation of this exemption.

\_\_\_\_\_ I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

\_\_\_\_\_ I understand that I may not hire an unlicensed individual to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law.

\_\_\_\_\_ I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on the property. My homeowners insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

\_\_\_\_\_ I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being permitted. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA), and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

\_\_\_\_\_ I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

\_\_\_\_\_ I am aware of construction practices and I have access to the Florida Building Codes.

\_\_\_\_\_ I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 1-850-487-1395, or at [www.myflorida.com/dbpr/pro/cilb](http://www.myflorida.com/dbpr/pro/cilb) for more information about licensed contractors.

\_\_\_\_\_ I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the address listed below.

\_\_\_\_\_ I agree to notify the Building Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure or in the permit application package.

\_\_\_\_\_ Licensed contractors are regulated by laws designed to protect the public. If I contract with a person who does not have a license, the Construction Industry Licensing Board, the Department of Business and Professional Regulation and the Building Department may be unable to assist me with any financial loss that I sustain as a result of a complaint. My only remedy against an unlicensed contractor may be in civil court. It is also important for me to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on my property, I may be held liable for damages. If I obtain an owner-builder permit and wish to hire a licensed contractor, I will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

Property Address: \_\_\_\_\_

I, do hereby state that I am qualified and capable of performing the requested construction involved with the permit application filed and agree to the conditions specified above.

\_\_\_\_\_ Title: \_\_\_\_\_

*Signature*

\_\_\_\_\_   
 Print Name

STATE OF \_\_\_\_\_   
 COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me on this \_\_\_\_\_ day of \_\_\_\_\_, 2011, by \_\_\_\_\_, who is personally known to me or who has produced \_\_\_\_\_ as identification and who did not take an oath.

Notary Public \_\_\_\_\_ SEAL:

Type/print name \_\_\_\_\_

**A violation of this exemption is a misdemeanor of the 1<sup>st</sup> degree punishable by a term of imprisonment not exceeding 1 year, and a \$1,000 fine in addition to any civil penalties. In addition, the local permitting jurisdiction shall withhold final approval, revoke the permit, or pursue any action or remedy for unlicensed activity against the owner and any person performing work that requires licensure under the permit issued.**

**Reroofing Inspection Affidavit  
Nailing, Sheathing, Dry-In & Flashing**

***REROOF ONLY – NOT NEW CONSTRUCTION***

Permit No: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I \_\_\_\_\_, as a(n) General\*, Building\*, Residential\*, or Roofing Contractor, Engineer, Architect, or F.S. Chapter 468 Building Inspector, I hereby affirm, that all of the foregoing information is true and accurate and that the sheathing, nailing, dry-in, and flashings at the above referenced address/lot have been installed in accordance with the attached scope of work, complying with all applicable codes and standards. Based upon my examination I have determined the installation was done in conformance to the Hurricane Mitigation Retrofit Manual (Based on F.S. Chapter 553.844).

License #: \_\_\_\_\_

Company/Contractor: \_\_\_\_\_

Contractor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Must be signed by license holder)

***A final roofing inspection is required:***

**This signed and notarized affidavit must be provided at the job site at the time of the final roofing inspection along with digital photographs of each plane of the roof with the permit number or address number clearly marked on the deck for each inspection. The photographs must include a ruler or measuring device to confirm nail spacing and overlaps including drip edge and valley flashing.**

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_ day of \_\_\_\_\_, 20\_\_\_, by \_\_\_\_\_ who is personally known to me \_\_\_or has produced \_\_\_\_\_ as identification and who \_\_\_did or \_\_\_did not take an oath.

\_\_\_\_\_  
Notary Public

Printed Name: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

\*No general, building, or residential contractor certified after 1973 shall act as, hold himself or herself out to be, or advertise himself or herself to be a roofing contractor unless he or she is certified as a roofing contractor.